DOCUMENT RESUME

ED 409 094 PS 025 510

AUTHOR Huffman, Priscilla D.
TITLE At-Risk Kindergarten Program Evaluation: A Final Report.
PUB DATE Feb 97
NOTE 63p.
PUB TYPE Reports - Descriptive (141) -- Tests/Questionnaires (160)
EDRS PRICE MF01/PC03 Plus Postage.
DESCRIPTORS Diversity (Student); *Early Intervention; *High Risk Students; Instructional Effectiveness; *Kindergarten; Kindergarten Children; Primary Education; Program Effectiveness; Program Evaluation; Student Adjustment
IDENTIFIERS Wisconsin

ABSTRACT

This study examined the effectiveness and efficiency with which the Chippewa Falls Area United School District (Wisconsin) addressed the needs of its diverse student population, focusing on the At-Risk Kindergarten Program implemented by the school district in 1992. The program serves a selected segment of the kindergarten population in an all-day, every-day program which included a 1:15 maximum adult-child ratio to address the developmental and instructional needs of at-risk kindergartners. The purpose of this study was to determine how effective the current program is, to explore options for the program, and to draw conclusions about the program. The methods used to gather this information included discussions with the two At-Risk Kindergarten teachers and the superintendent of schools, surveys completed by parents, observations of students, and reviews of each child's progress. The findings highlighted the absolute necessity of individual and small-group instruction. Both teachers were found to be effective even though their styles of teaching differed, and the program was positively impacted by Instructional Assistants and Resource Specialists who supplied individual instruction to the children. Other findings included: (1) the same expectations were placed on at-risk children as on non-at-risk children; (2) instructional pacing was quicker in non-at-risk kindergarten classes than at-risk classes; and (3) the adjustment of the at-risk child to regular primary classes was often overwhelming for the student. (Includes copies of the questionnaires given to both staff and parents.) (DCP)

****
* Reproductions supplied by EDRS are the best that can be made *
* from the original document. *
****

ED 409 094

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)
X This document has been reproduced as received from the person or organization originating it.
☐ Minor changes have been made to improve reproduction quality.
• Points of view or opinions stated in this document do not necessarily represent official OERI position or policy

AT-RISK KINDERGARTEN

PROGRAM EVALUATION: A FINAL REPORT

submitted to

Dr. Larry D. Annett, Superintendent
Chippewa Falls Wisconsin
Unified Area Schools

February, 1997

by

Priscilla D. Huffman, Ph.D.
Professor, Early Childhood Education
102 Home Economics Building
University of Wisconsin-Stout
Menomonie, WI 54751

715/232-2377

PERMISSION TO REPRODUCE AND DISSEMINATE THIS MATERIAL HAS BEEN GRANTED BY
Priscilla D. Huffman
TO THE EDUCATIONAL RESOURCES INFORMATION CENTER (ERIC)

PS 025510

BEST COPY AVAILABLE

TABLE OF CONTENTS

PAGE

I. HISTORICAL OVERVIEW..... 3

II. PURPOSES OF THIS PROGRAM EVALUATION..... 4

III. METHODS EMPLOYED..... 4

IV. SUMMARY OF FINDINGS..... 6
- A. AT-RISK KINDERGARTEN OBSERVATIONS.... 6
- B. OTHER ON-SITE OBSERVATIONS..... 7
- C. WRITTEN DOCUMENTATION..... 7
- D. INPUT RECEIVED FROM KEY PERSONS THROUGH QUESTIONNAIRES..... 8
  1. Findings from Questionnaire which was the same for all Instructional Staff..... 9
  2. Findings from Specialized Questionnaires.....12
     - a. At-Risk Kindergarten Teachers.....12
     - b. Other Kindergarten Teachers.12
     - c. Grade 1 - 5 Teachers.....13
     - d. Subject Specialists.....14
     - e. Pupil Services and Special Education Resource Specialists.....15
     - f. Instructional Assistants....17
     - g. Administrative and Central Office Staff.....17
     - h. Parents.....19
- E. INTERVIEWS AND OTHER INFORMATION RECEIVED.....20

V. CONCLUSIONS AND RECOMMENDATIONS.....21

VI. BIBLIOGRAPHY.....25

VII. APPENDIX.....29

PART I. HISTORICAL OVERVIEW

Chippewa Falls Area Unified School District has a history of effectiveness and efficiency in addressing the diverse needs of its student population. Both instructional and administrative staff are encouraged to suggest/recommend changes for the improvement of services and instruction. The At-Risk (Transition) Kindergarten Program is an example of programmatic implementation based on suggestions from within.

In 1992, Kindergarten Teachers, Resource Specialists and Elementary Principals saw a need for serving Kindergarten children more effectively: i.e., serving a selected segment of the Kindergarten population in an all-day, every day program which included a 1:15 maximum adult/child ratio for the purpose of addressing at-risk children's various developmental and instructional needs. Submitted to the Superintendent of Schools by the Kindergarten Teachers was a "Kindergarten Proposal For Program Change." Subsequent discussions and input from Principals and various Resource Specialists supported the idea of a demonstration all-day every day program for selected at-risk children, rather than their being enrolled in the district's regular all-day, alternate day Kindergarten program.

With approval and support from the School Board, during the summer of 1992 plans were finalized for offering this demonstration program in two classrooms. In work sessions with Kindergarten Teachers and a consultant from the University of Wisconsin-Stout, features of this demonstration program were identified:

1. to follow the established Chippewa Falls Kindergarten comprehensive curriculum which encompassed all subject-matter and developmental areas;
2. to provide small group instruction in all skill areas with the assistance of support staff;
3. to teach various Social Studies and Science content and process skills through integrated units;
4. to emphasize both Language Arts and Language Development;
5. to encourage children's individual decision-making skills;
6. to provide both physical fitness and social/emotional development experiences daily; and,
7. to implement current Early Childhood research knowledge.

Thus, the At-Risk Kindergarten Program became a reality, beginning in the fall of 1992. Since then, the two At-Risk classrooms have continued (sometimes being referred to as "Transition Kindergarten" rooms to distinguish the program from the regular Kindergarten program, even though it was <u>not</u> a transition kindergarten as commonly defined in educational practice). To date, 138 children have been served. The first-year pupils are currently in the Fourth Grade. Consistency in program implementation has been provided by the same two dedicated teachers

for the past five years: Ms. Susan Dole and Mrs. Cheryl Jensen.

The Chippewa Falls Area Unified School District has expanded its offering of all-day, every day Kindergarten since 1995 and all children who are eligible for Kindergarten can now attend each day. In the spring of 1996, the decision was made to evaluate the effectiveness and continued need for the At-Risk Kindergarten Demonstration Program. During the summer of 1996, a consultant was contracted to conduct a qualitative program evaluation so that the findings and recommendations could be known prior to the spring, 1997 budget planning cycle.

The following sections of this report present the methods employed, findings, conclusions and recommendations resulting from this program evaluation.

PART II. PURPOSES OF THIS PROGRAM EVALUATION

Answers to many questions were sought through this program evaluation which contributed to addressing the main question of "Is this program the best way to serve Chippewa Falls' identified at-risk Kindergarten children?" Answers to these supporting questions were sought:

A. How effective is the current program in addressing the pupils' various needs?

B. What are the opinions of various Key Persons within the school district regarding this program?

C. What improvements or changes could be made? and/or

D. What other strategies might be employed to serve this student population at this time?

E. Based on input received through observations, interviews, written and other documentation, as well as through completed questionnaires, what conclusions can be drawn and recommendations made?

III. METHODS EMPLOYED

The following is a brief outline of the methods employed and activities completed to answer the questions identified in the previous section:

A. Reviews of current "at-risk" and related Early

Childhood "best practices" were made prior to developing the evaluation plan which included the development of specific questions for use in interviews, observations and questionnaires. A "Bibliography" of selected research and related articles constitutes Part VI. of this report.

B. Initial discussions were held with Dr. Annett, Superintendent of Schools, regarding the form of the evaluation, preferred procedures, contact person and types of questionnaires.

C. Initial discussions were held as well with both of the At-Risk Kindergarten Teachers, Ms. Susan Dole and Mrs. Cheryl Jensen regarding typical schedules, enrollment data, suggested procedures and programmatic overview.

D. Letters were sent to all Key Persons within the Chippewa Falls Unified School District and School Board Chairperson, sharing information about the upcoming program evaluation. Key Persons included the following: At-Risk and Regular Kindergarten Teachers, First - Fifth Grade Teachers, Art, Music and Physical Education Specialists, Speech/Language Clinicians, Exceptional Education and Title I Teachers, Instructional Assistants, Guidance Counselors, School Psychologists, Elementary Principals and other Administrative and Central Office Staff.

E. Forms were distributed through classroom teachers to the parents of all current and past children enrolled in the At-Risk Kindergarten, requesting permission to access their child's cumulative folders. (A sample form is in the Appendix.)

F. Four on-site observations of the At-Risk Kindergartens were made on separate occasions in order to document the implementation of various program components.

G. On-site observations were also made of two other Kindergarten programs the evaluator had not previously observed through other university assignments: classes of Mrs. Rebecca Schneider and Mrs. Holly Holtz, both at Parkview Elementary School.

H. Additional on-site observations were made within the two Primary-level classes of Mrs. Pat Gray (Grade 1 - Halmstad Elementary School) and Mrs. Jeanne Barnier (Grade 2 - Parkview Elementary School) for the purpose of observing a small sampling of children previously enrolled in the At-Risk Kindergarten Program.

I. A review of a sampling of children's cumulative folders, ranging from the levels of Kindergarten - Grade Four was made for the purpose of identifying any possible patterns following the year of At-Risk Kindergarten (e.g., attendance, referrals, parent involvement and academic proficiency).

J. After review and approval by Dr. Annett, questionnaires were administered to all instructional, resource and supportive staff (all Key Persons listed in section letter "D" above) at after-school meetings held at each of the six elementary schools: Halmstad, Hillcrest, Jim Falls, Parkview, Southview and Stillson. Questionnaires were also distributed to Central Office staff and those who were unable to be present at the elementary school meetings.

Each instructional staff member was asked to complete

two questionnaires: (1) a general questionnaire completed by all instructional staff; and, (2) a specialized questionnaire specific to each Key Person's position responsibilities (Samples of all forms are in the Appendix). Each Elementary Principal and Central Office staff person completed a separate form (A sample form is in the Appendix.)

K. After review and approval by Dr. Annett, parent questionnaires were distributed through the regular classroom teachers and sealed responses from parents were collected for the program evaluator via the Executive Secretary in the district's Central Office.

L. Telephone interviews were made to clarify input received and to obtain additional insights.

M. All data received through the questionnaires were carefully reviewed, tabulated and summarized, together with other sources of information gained through observations and interviews. These findings are presented in the next section (PART IV.) of this report.

N. A meeting to review a draft of pertinent portions of the final report was held for all interested staff to provide a forum for discussing the findings, conclusions and recommendations prior to the submission of the final report.

PART IV. SUMMARY OF FINDINGS

During the five years the At-Risk Kindergarten Demonstration Program has been implemented, some 138 children have been served. Of these 138 children, 114 remain in the Chippewa Falls Area Unified School District.

The needs of these children have been diverse and have included components within all major developmental areas: behavioral, emotional, social, speech/language, cognitive and physical development. The composition of each of the two kindergarten programs has varied from year-to-year and the teachers have channeled their efforts to help the children adjust to the school environment and progress in all developmental areas, in order to lay the foundation for continued success as the children progressed through the primary grades.

Lower adult/child ratios, additional support staff and various resource staff have assisted in the teachers' efforts and successes. A review of all data strongly indicates that this demonstration program has been very effective in addressing the needs of the identified at-risk population at the Kindergarten level.

A. AT-RISK KINDERGARTEN OBSERVATIONS

1. On-site observations of the children within the At-

Risk Kindergartens, together with the daily/weekly schedules, documented the absolute necessity for regular individual and small group instruction for these children. Because of the type of program being offered, these children were being successful and feeling successful in their endeavors. Some children needed to learn the basics of acceptable classroom behavior, while others had more cognitive or physical needs.

2. Even though the individual styles of the two teachers varied, both were effective in achieving expected results with the children. The teachers are to be commended for their five years of consistent and continued enthusiasm, dedication and demonstrated expertise in working with such diverse and challenging populations!

3. Together with smaller class sizes, the assistance provided by Instructional Assistants and Resource Specialists provided an effective means for more individual and small group instruction. Children could be kept "on-task" and individual skill development was addressed specifically during these times. During the times when an Instructional Assistant was unassigned to the program or unavailable to be of service to the program because of needs elsewhere in the school, the program was negatively impacted.

B. OTHER ON-SITE OBSERVATIONS

Other classroom observations at the Kindergarten and Primary levels, together with teacher discussions and prior knowledge of the school system illustrated:

1. Expectations for children at the end of Kindergarten are the same for all children, at-risk and non-at-risk alike. The same "Progress Reports" are completed for all Kindergarten children, addressing the areas of emotional/social development, self-expression/communication skills, participation in music, art, physical education, work habits and attitudes, and reading, writing and numerical readiness.

2. The instructional pacing within regular Kindergarten classrooms tends to be quicker than in the At-Risk Kindergartens.

3. The adjustment of At-Risk Kindergarten children to the size, adult/child ratio and routines of regular Primary classrooms is frequently overwhelming: many of the needs of the At-Risk children which were successfully addressed at the Kindergarten level through the Demonstration Program are not being addressed in a similar manner at the Primary levels in spite of the excellence of the teachers and availability of current resources (e.g., Title I, and other Resource Specialists). The success provided through the At-Risk Kindergarten cannot be maintained in many instances and this causes frustration on the part of both At-Risk Kindergarten and Primary staff members.

C. WRITTEN DOCUMENTATION

1. A review of cumulative folders of current and past At-Risk Kindergarten children suggests that

a. Any problems which were evident or identified at the Kindergarten level were noted and referred for additional evaluation and support.
b. Many identified needs at the Kindergarten level continued to be evident at the Primary level. While the At-Risk Kindergarten Program focussed on building successes and providing a firm educational foundation, a good portion of these children continued to struggle in subsequent years when the 1:15 adult/child ratio could not be maintained nor accompanying small group instruction implemented. The At-Risk Kindergarten Program should not be expected to "cure" problems, but rather to provide an effective foundation upon which to build future successes.
c. There are also some At-Risk Kindergarten children who have been successful in the Primary grades. These tend to be children who were placed in the At-Risk Kindergarten program for reasons other than behavioral or emotional development or possible learning disability. No other definitive conclusions can be reached at this time because the population being served is so diverse.
d. Children's attendance patterns vary, but each child's attendance tends to follow the same pattern from year to year, ranging from almost never absent to a high absentee rate.
e. Additional resources from outside the school district seem to be utilized as needed by school district specialists who have worked with referred children.

2. A comparison was made of Title I Specialists' lists of children being served at the four elementary schools which are eligible for Title I services, with the names of At-Risk Kindergarten children who could be served, past or present. This comparison shows that of the children being served, approximately 13% of the Title I Specialists' listings consist of At-Risk Kindergarten students, past or present.

D. INPUT RECEIVED FROM KEY PERSONS THROUGH QUESTIONNAIRES

Questionnaires were completed by instructional and clinical staff in all six elementary schools, by administrative personnel and by parents. The following are the results obtained through the questionnaires. Results are reported in terms of the number of responses to each category on the questionnaire and summarized comments are also included.

Findings: Instructional and Clinical Staff Questionnaires

Instructional and clinical staff completed two questionnaires: one which was the same for all staff and one which contained questions which pertained to their individual position responsibilities. (See Appendix for sample questionnaires.) Responses were as follows: (Question numbers match question numbers on the questionnaires. Any variations in totals are due to differing assigned positions held by staff, or responses left blank. The wording of summarized comments was sometimes adjusted very slightly in order to represent more than one comment while maintaining the integrity of the responses.)

1. A total of 124 questionnaires were completed by elementary instructional and clinical staff.

2. 96 indicated that they had worked with At-Risk Kindergarten children or "grads" in the past or at present, 24 had not worked with these children and three didn't know if they had or not. The extent of involvement with the children varied.

3. 48 noticed no differences between At-Risk Kindergarten grads and previous At-Risk children who did not have the Demonstration Program, 43 didn't know and 26 did notice a difference.

Summarized comments:

Some noticed that the children were more competent in readiness (academic) skills, were more confident and had more meaningful experiences to draw upon and several comments emphasized that the differences varied from child to child and that some students were succeeding while others were still struggling. Also noted was that the differences seemed to be smaller now that all children attend Kindergarten all day every day.

4. 50 predicted "less than average success" for the At-Risk "grads" as they progressed through school, 40 predicted "average success", 14 predicted "little success", and three predicted "high success".

Summarized comments:

Degree of success is different for each student and depends upon the reason they are/were in the program. Also, because the most needy children have been in the program, they continue to have problems. Family background and higher grade-level interventions were also mentioned as factors.

5. 49 indicated that there was not a need for the At-Risk Kindergarten Program, 41 said there was a need and 33 were unsure.

Summarized comments:

Most frequently mentioned was the fact that the district now offers all day, every day Kindergarten to all children which was not the case when the program began. Other main thoughts were in support of these children needing a smaller group, but that other at-risk children also need to be served at the Kindergarten and higher levels.

6. 59 said there was a need for changing or revising the current Demonstration Program, 48 were unsure, and 15

saw no need to change or revise the program.

Summarized comments:

Suggestions for change included eliminating the program and redistributing the at-risk children among all of the Kindergartens to lower the student/teacher ratio district-wide now that there is an all day, every day program for all kindergartners. Additional comments emphasized the need for good role models for these children and further development of guidelines for admission to the program. Also mentioned with some frequency was the need for follow through service in the primary grades, working more with parents, and the need for Instructional Assistants within the regular classroom. Changing the program to a transition program between Kindergarten and First Grade was also suggested.

7. Strengths of the At-Risk Kindergarten Program were identified as follows: (frequency of responses are indicated in parentheses)

---Smaller class size and student/teacher ratio (65)
---More individualized program (extra help, extra attention given to children, extra staff for more small group work and one-to-one assistance) (45)
---Identification of and early intervention to address various needs (12)
---The first three years doubled the instructional time with the children (6)
---The teachers! (4)

Suggestions for change or improvement most frequently included lowering the number of students in all Kindergartens, reducing enrollments in primary grades, continuing the program both into the Primary grades, because there are many more at-risk children than are presently being served, and to the Preschool level, reintroducing Kindergarten screening for all children, and increasing parenting skills.

8. Identified most frequently as At-Risk Kindergarten Program weaknesses were:

---Lack of positive role models and interaction with non-at-risk children, academically and behaviorally (36)
---Problems associated with the children's transition from Kindergarten to regular First Grade (10)
---Inability to service enough children and/or criteria for selection not "catching" all needy children (10)
---Lack of communication/understanding what the program is about and what it's doing, and it not serving as a 'dumping ground' (6)
---Not enough time to educate parents enough (4)

Suggestions for change or improvement to address the identified programmatic weaknesses included placing the children in regular Kindergarten classrooms following the inclusion model, making all class sizes smaller, adding Instructional Assistants, using more materials which are supported by educational research, providing the means for children to "mix" and increasing the level of parent education.

9. 53 indicated that the At-Risk Kindergarten Program was not the most effective way to use the $$ available to

serve these at-risk children, 40 were unsure and 20 thought that the program was the most effective way to use the $$.

Summarized comments:

Of the many comments written in further explanation of how $$ might be spent more effectively, the most frequent response (32) was to use the $$ to keep the regular kindergarten classes smaller now that all day, every day kindergarten is provided; use the $ for at-risk children, but in a different way (more inclusionary); reduce the class sizes at the primary level, especially first and second grades; provide more support for small group help and more Resource/Clinical Specialists (LD, Title I and Guidance Counselors); and, more parenting classes.

10. 60 indicated that the current methods used to identify "at-risk" children seem to be working fine and 37 respondents offered suggestions.

Summarized comments:

Several comments indicated that there seemed to be uncertainty about the purpose(s) of the program and how and why certain children were selected and others not selected; other comments indicated that there was a need for flexibility in reassigning children after the start of the school year as well as the need for additional, more comprehensive screening for all children before beginning kindergarten. 'Walking parents through' necessary forms is sometimes needed and having a team of people meet regarding children was also suggested.

11. In terms of "what else should we be asking in this program evaluation?", there was a diversity of responses, but overall there seemed to be a need to answer the questions of whether the children were better off than they would have been without the program, and whether the program should be continued into the Primary grades. Other questions included the legality of grouping children in a situation that might delay their chance to get needed help, and contrasting questions of concern regarding what might happen to these children if we didn't have the program. Also suggested was the possibility of the need for a district-wide K-12 at-risk plan, the need to involve regular Kindergarten teachers in decisions regarding this program, the need for more information about this program, and the question of whether the children's needs could be met comfortably in a regular classroom.

12. Additional comments/recommendations/anecdotes requested in this question resulted in a range of responses, mostly repeating statements made in previous sections. Additional different comments included several references to 'the earlier the intervention, the better'; several references to children's home life and the successes of the children occurring more frequently when effective parenting relationships have been established; questioning the soundness of grouping behavioral and academic problems together; questioning who should be served by the program; and, several comments supporting the work the two teachers are doing at this level.

Findings: Specialized Questionnaires

Specific questions were asked of each group of Key Persons listed in Part III. "Methods Employed" section of this report. The results of these questionnaires are as follows: (As with the other questionnaires, answers have been combined to provide an overall indication of responses.)

1. At-Risk (Transition) Kindergarten Teachers

The two At-Risk Kindergarten teachers indicated:

a. <u>if</u> placements are appropriate, it is educationally sound to group at-risk children together for instruction. The program should not be used as a 'dumping ground' for behavior management problems.

b. they <u>are aware</u> of a stigma being associated with the children being served due to lack of understanding of the program's objectives by parents, colleagues and community.

c. staff development needs in areas of pervasive development disorder autism, ADHD, ADD, increasing family involvement and a newly developed program "Errors in Thinking."

d. there is a need for increased parent education. Suggestions included inservice sessions on parenting skills, hearing speakers such as Kroenenberg, reading and viewing Jim Fay materials, observing teachers model various strategies and involvement of the school nurse.

e. their biggest challenges have been the difficulty in implementing a program to meet the diverse needs of the children; the fatigue associated with implementing the program and addressing large numbers of behavior problems; some limited support from colleagues; frustration in knowing children will not be able to receive similar support in subsequent years; getting parents to realize the importance of working with children at home and working with the school, trying to obtain some needed services and trying to compensate for Instructional Assistant time lost.

f. that as a direct result of the program, they have observed good to significant improvement in the children in all areas overall, with some improvement in listening, music, p.e., behavior and parental/family involvement, depending on the individual children. Comments suggested that compared to the beginning of each year, children improved significantly by the end of the year in all areas. Each year's group of children has had varying needs.

g. the program has made a significant difference in addressing children's behavioral/social and academic needs and in providing a firmer foundation for future learning. There is also a strong desire to continue these successes into the Primary grades.

2. Kindergarten Teachers

The 14 Kindergarten teachers indicated:

a. more of them (8) had not noticed any differences in their own Kindergartens since the At-Risk Program has been in operation, while some of them (6) had noticed some differences. Some indicated that there are other at-risk children in their classes already, continued support is needed in the primary grades and that more children need to be served.

b. most of them (12) do not believe that it is programmatically sound to group the at-risk children together for instruction. They indicated that it may be better academically but good role models behaviorally are lacking and the children could benefit from being with other children (inclusion seems to be a better model at this time to avoid "labeling"). They also stated that each child is important and needs specific attention at this level of instruction.

c. an equal number (7) indicated that there <u>was</u> or <u>was not</u> a need for staff development should the At-Risk Kindergarten program be discontinued and the children be distributed among the various Kindergartens in the future. Identified staff development needs were in the areas of family education and special disorders which should be addressed by specialists as well as working with at-risk children and families in general which they felt they were already doing in their current classes.

d. 11 teachers indicated that they were not aware of any stigma associated with these children, while three teachers indicated that children and adults (parents, teachers and staff) are labeling these children and the stigma follows them into the Primary grades.

e. the program was viewed as having both advantages and disadvantages, that more children need to be served, that the current program is too limited in scope to serve all children who could benefit by it.

3. **Grade 1 - 5 Teachers**

Fifty-four teachers, mostly Grades 1 - 4, and some Grade 5, indicated:

a. no difference (34), an increase (11) or a decrease (4) in the number of referrals which needed to be made. Comments: More children seem to be coming to school with family problems and referrals that have been requested in Kindergarten have been put on hold.

b. they have noticed no difference (20) in their job being made easier as a result of the At-Risk Program while 15 indicated a definite "no" and 12 a definite "yes" that their job was easier. Comments emphasized that the program helped most children before all day, every day Kindergarten for all children in terms of the children having more exposure to school, but that the regular all day, every day results are not known yet.

c. there <u>is</u> a need for increased parent education for the families of at-risk children (42). Comments emphasized that schools alone cannot change at-risk children, but getting

families involved is a challenge. Many suggestions were offered as to what kind of parent education would be helpful, ranging from working with children at home with school work, answering school correspondence, how to provide structure and assist children with organizational skills, discipline and social skills, teaching responsibility, health, helping them to feel that they are not alone with children's problems, ideas for positive family times and helping children succeed, and suggestions for specific parent/family education programs like P.E.T. and FAST.

d. more teachers indicated that there was <u>not a need</u> for staff development than those who saw a need (28 "no" to 19 "yes"). Comments from those who wanted staff development indicated that it should be practical and focus on more help with over-active children (ADHD, ADD) and the age-old question on how to get parents more involved.

e. almost all of the teachers (52) were not aware of any stigma being associated with children enrolled in the at-risk program, while those who responded that there was a stigma (2) said that the children were known by students as the 'special kids' or were referred to by others as the 'slower-paced' kids.

f. 35 teachers indicated that there was not any other information/data on these children that they would like to have provided, while 13 indicated a desire for more information. Mentioned were more information from the At-Risk teachers such as strategies that worked, more tracking of the students from year to year, where to turn for help, more time to work with each child, and the desire to see the results of this report.

g. Several teachers stated that they did <u>not</u> like the question (Question #8) which asked them to indicate <u>how well</u> overall the at-risk children were doing as compared with other children in their class because it was different for each child. A pattern developed from the results of the questionnaires which were completed, however, indicating that, overall, most children were functioning a little lower or about the same as other children, with a few scattered responses indicating that specific children in certain areas were functioning somewhat better than other children. Key areas still needing attention were identified as 1) social interaction skills, especially ability to work with other children, respect for others, acceptance by others and the ability to express own thoughts, ideas and feelings; 2) the whole area of Language Arts, but especially the areas of listening, followed equally by writing and reading; 3) emotional maturity, self-control and behavior; 4) positive self-concept; 5) fine-motor control; 6) assumption of responsibility, especially for one's own learning; 7) the ability to make choices; and, 8) parental/family involvement with the school.

4. Subject Specialists

Fifteen Subject Specialists responded to their specialized

questionnaire and indicated the following:

a. More Specialists agreed that the At-Risk Program provided a means for them to do their job more effectively (9) than did not agree (7). Comments focused on small groups being beneficial, providing an opportunity for individual attention and pacing. Some Specialists indicated that working with these Kindergarten children was a disciplinary challenge each session, while others noted that these children did indeed need extra help and that Instructional Aide time would be helpful in working with these children in their specialty area.

b. The largest number of respondents (6) indicated that the At-Risk Kindergarten children were <u>not</u> progressing more in their related area of expertise while they were still in Kindergarten than they might if enrolled in a regular Kindergarten, while 4 Specialists indicated that progress was about the same and 3 indicated that the children <u>were</u> progressing more. Comments indicated that because of the smaller class size, more individual help can be given, and if they weren't in the At-Risk classroom, the children would be far behind in their progress. Some of the other comments were quite similar to those in the previous question.

c. When comparing how well the At-Risk Kindergarten "grads" are progressing, as a whole, with other children within their specialty area, most Specialists ranked the children somewhat lower, with some At-Risk children doing about the same as other children, and a couple of indications of the At-Risk children doing a little better than the other children. Key areas still needing attention identified by the Subject Specialists matched very closely with those identified by the Grade Teachers: 1) social interaction skills, especially the ability to work with other children, respect for others, ability to share and ability to express own thoughts, ideas and feelings; 2) Language Arts areas of listening, writing and reading; 3) emotional maturity, self-control and behavior; 4) physical development, especially fine-motor development; 5) assumption of responsibility and ability to make choices; and 6) parental/family involvement with the school. An additional comment was that there was not a lot of difference between present Title I students at the same grade level and those served by the At-Risk Kindergarten.

d. In describing any differences having the At-Risk Kindergarten has made in the Subject Specialists carrying out their own position responsibilities, the following was mentioned: some students now in Fourth grade are very successful, creative and verbal; some children do better and some stay the same, especially behaviorally; smaller groups provide better opportunities for hands-on learning; and, as a whole, while the At-Risk students are less mature, less attentive and more active, the At-Risk Program allows them greater success, builds their self-esteem which in turn promotes greater motivation to learn.

5. Pupil Services and Special Education Resource

Specialists

Seventeen specialized questionnaires were completed which indicated:

a. differences in opinion as to whether the program provided the means for the Specialists to do their job more effectively (9 indicated that the program had not allowed them to do their job more effectively and 7 indicated that the program had allowed them to do their job more effectively). The two At-Risk teachers were cited as good sources of insight and information, and providing extra help sometimes prevents some referrals. Also mentioned were small group instruction advantages, total classroom instruction being a definite challenge and some other children not being able to be served.

b. when asked to describe any differences having the At-Risk Kindergarten has made in terms of their carrying out their specific responsibilities with these children, responses varied from being able to target services for carryover purposes, fewer First grade referrals, but necessary referrals for children with severe problems, program allowing children to grow academically to be successful, to noting no major differences.

c. 6 Specialists indicated that referrals are being made earlier, 5 thought referrals were being made about the same and 4 thought they were being made later. There was some indication that referrals seemed earlier for ADHD, CD and EEN, but later for Speech because it takes a while to identify the extent of speech concerns.

d. Most thought that the number of referrals were about the same (8), 5 thought there were less and 3 thought that there were more referrals. Comments indicated that some borderline students may have avoided referrals, earlier identification may also be the result of Child Development Days and that there were more referrals for Speech and about the same for EEN.

e. 8 Specialists indicated that the At-Risk Kindergarten Program has not reduced the need for referrals while 4 thought the need for referrals has been reduced. Variations indicated that behaviorally, expectations of school and parents are addressed earlier, but that certain areas like LD, the need shows up regardless of the prevention attempted. There was also the comment that there are less referrals after First Grade.

f. The need for services has been identified as 'extensive' by 8 respondents, 'average' by 6 respondents and 'limited' by 1 respondent. Comments indicated that there are a lot of speech and language delays and ADHD referrals. How to best serve LD children varied. Also, there was a call for more specific curricular skill materials and an indication that because these were the neediest children, School Psychological services are often involved. Guidance Counselors also indicated time constraints on their services but that needs depend on children and family involvement and 'functioning ability'.

g. The degree of adequacy of needed services being provided to At-Risk Kindergarten children was viewed as 'adequate'

by most Specialists (12), 'more than adequate' by 4 Specialists and 'less than adequate' by 3 Specialists. Comments indicated that Guidance services are less than adequate at the Kindergarten level, EEN speech and language services are adequate and that the At-Risk program is intensive, requiring a significant amount of energy and that the At-Risk teachers are doing an excellent job.

h. Specialists differed as to their thoughts of whether parents/families of the At-Risk Kindergartners were making better use of the services available to them (5 'no' and 4 'yes' responses). There were consistent comments, however, about the need for additional parenting skills overall.

i. Suggestions offered by the Specialists included Speech and Language Specialists indicating that more time at an earlier age is better, and that group centers in an inclusionary model should be continued; CD Specialist indications were to continue goal conferences with academic comparisons made and skill levels noted; LD Specialist indications were to provide parenting services; and Guidance Counselors suggested more services at the post-kindergarten (First Grade) level, more programs like FAST so that families could be targeted, not just the children, more emphasis on Building Assistance Team Meetings, more collaboration with outside agencies and community intervention. Lunch and Learning and family-centered models were also suggested.

6. Instructional Assistants

Eight Instructional Assistants responded to their specialized questions as follows:

a. Their responses varied greatly from person to person, year to year, but their most frequent use of time seemed to be working with children in small groups, followed by working with children or supporting instruction in large group settings, preparing educational materials, and last, working with children individually.

b. Several suggestions were offered as to how their skills and/or time might be used differently in addressing these At-Risk children's needs, including maintaining small group instructional time as best use of time is working with small groups and individuals. Time was being used efficiently and small class sizes were viewed as very beneficial.

c. Other comments offered included the need to continue a follow-up of services into the Primary Grades, the need for children to have specific instruction in phonemic awareness and sound recognition to become good readers and that the children leave the program feeling confident about their ideas and abilities and possess a great love of learning.

Findings: Administrative and Central Office Staff

Nine questionnaires were completed by Administrative or Central Office Staff which indicated the following: (differences in numbers of responses were due to unanswered questions)

a. Respondents varied in terms of the extent of their involvement with the At-Risk Kindergarten Program.

b. Three respondents indicated that they had noticed some differences between the At-Risk Kindergarten "grads" and previous at-risk children who had not been enrolled in the program, three indicated that they had not noticed any differences and two had not had opportunities to observe differences. Comments included that there seemed to be a more 'watchful eye' on these students, providing earlier intervention in problem areas, a more positive attitude about school and learning and more confident learning and that students seem to be better off academically that other at-risk students.

c. In terms of whether there was a need for the Program, three said 'no', three were 'unsure' and two said 'yes'. Smaller class sizes for all Kindergartens with the current numbers of students varying from year to year and current budget issues comprised the main comments.

d. When asked whether there was a need for changing or revising the current Program, four said 'yes', 'two' said 'no' and two were 'unsure'. Suggestions offered included placing the at-risk population within regular classes, reducing the Program to one classroom of 10 students district-wide and using the second teacher to reduce class sizes of all Kindergartens, extend what we have learned from this Program into all Kindergartens in terms of smaller class size, student/teacher ratio, and resource and extra help.

e. Strengths of the Program were identified similarly to those by other district staff, including small numbers of children, more individualized programming, better academic preparation and parents' connection to school and teacher.

f. Suggestions for change or improvement were very similar to the others already reported and included reducing all Kindergartens class sizes, increase parental involvement and taking another look at screening procedures.

g. Program weaknesses included concern for budget dollars, public perception of being "in that class", lack of good role models, parents not wanting their children split between two schools, numerous needy children in one room, adjustment to classes in following years, and attitudes of other Kindergarten staff toward the Program.

h. Suggestions for change or improvement included the exploration of possibilities of integrated classrooms, more dependable placement of students, mixing At-Risk children with other Kindergarten children for Music, Art and or P.E. to avoid self-containment problem and cycling other Kindergarten teachers through the Program so they could get a better "feel" for the demands of the Program.

i. When considering the $$ available, three respondents indicated that the Program was not the most effective

way to use the funds, three were unsure and two indicated that it was the most effective use of funds. Suggestions included keeping all class sizes small, increasing Guidance services, having all day every day Kindergarten now helps more children and that Phonology and EEN programs are more effective.

j. Five respondents indicated that the current screening methods seem to be working fine, and more than one respondent had suggestions as well: have Kindergarten teachers at registration nights together with the psychologist, use a more detailed questionnaire and possibly also have a conference with parents of candidates, develop a standard referral form that all agencies use and stick to the criteria, contact other districts to find a better identification process, placing students based on current methods used is not defendable, and encouraging the involvement of teacher/staff input in the referral process.

k. Additional comments included reference to affordability, keeping the numbers down in all classes, avoiding a burden on some and support for the Program.

Findings: Parents

Questionnaires were distributed to 114 parents whose child(ren) were enrolled in the At-Risk Kindergarten Program either currently or in the past. Completed questionnaires were received from 70 parents (61% return). Parents were asked to mark their preferred responses to eight statements by indicating that they "strongly agree", "agree", were "undecided", "disagree", or "strongly disagree" with each of the statements. Obtained results were as follows:

a. Most of the parents either strongly agreed (39) or agreed (25) that their child has benefitted by attending the Program. Four parents were undecided and one disagreed.

b. Most of the parents either strongly agreed (37) or agreed (23) that their child has a positive attitude toward him/herself. Seven parents were undecided, two disagreed and one strongly disagreed.

c. The largest number of parents agreed that their child will be successful throughout his/her school years (32), 19 strongly agreed and 18 were undecided.

d. Most of the parents either agreed (28) or strongly agreed (26) that because of this program, they felt better about the school. Fifteen parents were undecided and one disagreed.

e. A large proportion of respondents (47) strongly agreed that the Transition (At-Risk) Kindergarten teacher made me feel welcome and a part of their child's education, while another 17 agreed, three were undecided, two disagreed and one strongly disagreed.

f. Almost all of the parents either strongly agreed (37) or agreed (28) that they were adequately and appropriately involved in their child's education and academic progress. Four remained undecided.

g. Varying responses were obtained to the statement which applied to some of the parents who had other children who did not have the At-Risk program, as to whether they have noticed some of the benefits of a particular child attending the Program. Nineteen parents strongly agreed, 12 were undecided, 7 agreed and 3 disagreed.

h. An open-ended opportunity for comments about what the parents liked and didn't like resulted in 25 parents electing not to respond but others offering varying responses: several comments referred to the all day every day program being an advantage to their child, helping child adjust to school hours, providing consistency, making a better adjustment to First Grade, having established a structured base for learning and enjoying attending school on a regular basis. Longer days were also mentioned as providing time to finish activities which did not occur at the preschool level. One suggestion was to have the first week be half-day to ease the children into the regular schedule. Other representative comments focussed on the appropriateness of the Program for their child and how the Program has made their child excited to come to school, focussed on their child's strengths and weaknesses, learn more quickly, learn better social skills, retain more information and reinforce what has been taught. Other comments mentioned the concern about behavior problems, concern about sometimes children being eligible for Head Start and then sometimes not, that all teachers should listen to the concerns of parents, the need for additional services for more children, promoting the idea of having smaller classes at the First Grade also, the direct advantage of the small class size, one-to-one attention, addressing needs earlier and the warmth, caring and positive attitudes of the teachers and their 'teams'.

E. INTERVIEWS AND OTHER INFORMATION RECEIVED

An additional perspective was gained by talking with Mr. Ron Krueger who provided supplementary background information relating to the At-Risk Kindergarten Demonstration Program, including information on Child Development Days, the FAST program, the Family Resource Center, various collaborative preschool program models, and screening methods. He also shared some <u>very preliminary</u> results he was beginning to identify relating to the incident rate for referrals when comparing the children who have been in the At-Risk Kindergarten Program with the incident rate district-wide. His preliminary findings show that, overall, the At-Risk Program children had more referrals so far in their school experience (two examples ranged from 25% in one year to over 33% in another) while the incident rate for the school district was 11.3%. His view was that the screening methods seem to be working in terms of identifying children. Overall, referrals are "up" in the district. As more precise referral information is tabulated and available for review, it is expected that it will be included with this report.

Additional telephone conversations with various staff were very meaningful and helped to provide accuracy in presenting various findings as well as understand the extent and scope of district services.

PART V. EVALUATOR'S CONCLUSIONS

1. The At-Risk Kindergarten Program has been very effective in serving selected children for the past five years. The stated purposes for the At-Risk Demonstration Program have been fulfilled: to provide all day, every day instructional and developmental programming, including a 1:15 maximum adult/child ratio, and support staff, to address at-risk Kindergarten children's various educational needs. The benefits from carefully planned and implemented small group instruction have been demonstrated.

2. New developments have occurred in the district since the onset of the Demonstration Program, namely, all-day, every-day Kindergarten for all pupils and additional at-risk children needing to be served both at the Kindergarten and Primary levels.

3. There is a marked need for continuous and expanded district-wide service to at-risk children at the Kindergarten through Primary levels. This service should be clearly defined, continuously communicated among staff and consistently implemented.

4. With the current status of regular Kindergarten and Primary class sizes and staffing patterns, and the current emphasis on inclusion within elementary classrooms, there exists a need for realigning current resources and identifying new resources.

5. Preference is for the following recommendations to be implemented. **Under no circumstances should the At-Risk Kindergarten Program be discontinued without an improved plan and assurance of addressing the various needs of this population. It has been demonstrated that the school district's Kindergarten at-risk pupils need specific and continuous educational and support services.**

EVALUATOR'S RECOMMENDATIONS:

1. Redistribute and reduce Kindergarten class sizes as much as possible. Assuming an even distribution of children district-wide and an identical enrollment, if the two At-Risk Kindergarten teachers were included in a reallocation process, the average Kindergarten class size could be 20.1 children. If the two At-Risk Kindergarten teachers were included in the average for just the two

schools currently involved with the At-Risk Kindergarten Program, Halmstad and Parkview, the average class size could be 22 at Halmstad and 21.2 at Parkview.

2. Implement knowledge gained through this program evaluation by expanding individual and small group instruction in all Kindergartens district-wide. Assure additional adult resource availability twice daily for small group instruction/tutoring at the Kindergarten level. Recommended time allotment: approximately 40 minutes per session, with 30 minutes assigned to small group work and 10 minutes assigned to individual work with identified children within the regular classroom, both A.M. and P.M.. Ten children could be served individually each week through this process.

***Suggestion: Other variations could also be identified for using additional adult resources for small group instruction and individual tutoring. A task force of district staff, including Kindergarten teachers, could work out the "specifics" of this recommendation so the essence of the recommendation is maintained while providing flexibility within various schools.

To assist in breaking the At-Risk cycle which occurs within some families and/or to assist in a more comprehensive developmental and instructional plan for their child, perhaps the parents of children being tutored individually could be strongly encouraged to attend practical and appropriate parenting sessions. These sessions and follow-up activities on reinforcing learning at home would serve as the parents' contribution to the individual attention identified for their child to receive. Somehow, parent involvement must be increased, integrated and emphasized in order for the educational program to be continuously effective.

3. Implement <u>both Recommendations #1 and #2 together. **Recommendation #1 should not be implemented without being accompanied by Recommendation #2. The knowledge gained through the At-Risk Kindergarten Demonstration Program should now be applied within all Kindergarten classrooms in a fresh and appropriately designed format.**</u>

4. Reduce class sizes at the Primary level as much as possible. Children continue to need small group and individual attention at least through the Primary Grades in order to develop maximally in all areas. Currently, there is not an even distribution of Primary class sizes throughout the district, but the average First Grade teacher load is 21.3 pupils, the average Second Grade teacher load is 21.2 pupils and the average Third Grade teacher load is 23.8 pupils.

5. As a starting point to provide more small group and individual attention at the Primary level, use licensed <u>teachers</u> (qualified Instructional Assistants perhaps) to tutor First Graders

within the classroom, working with the First Grade teachers' regular curriculum as much as possible to foster skill development, behavior management skills and attention to tasks at hand. Recent research has demonstrated positive results when licensed teachers have been used as tutors within the classroom at the First Grade level. Recommended time allotment: 1 hour and 30 minutes per day per classroom.

In order for the preceding recommendation to be implemented, Instructional Assistants or other staff may need to be hired or utilized differently throughout the district: more in-class tutoring, less preparation of materials outside the classroom perhaps. Some resources may be saved by having less paper work run off as work sheets, etc., and having teachers identify other ways to involve children in learning, thus saving human resource time as well as paper costs. One example which might work is to allow teachers to be creative in designing various integrated learning tasks for their pupils while addressing various subject-matter objectives and skill development needs. Another possibility to help with small group instruction would be the continued and more extensive use of some Resource Specialists within the regular classroom rather than removing children for services.

***Suggestion: If adequate resources are not currently available for necessary tutoring, during this next year, a Primary-level Task Force could be charged with the task of exploring various methods for organizing curriculum which would provide effective teaching/learning strategies while making increased in-classroom use of available adults already in the district. For example, an evaluation of how all of the Elementary School Aide time is used could be made and such resources reassigned in order to provide additional adults within the classrooms for instructional and tutoring support. This would occur after the Task Force has identified its methods for organizing curriculum. An innovative pilot program within the district could be tried. Two suggestions for a less paper-intensive and more child-involved curriculum would be to explore methods used in the English and/or Welsh Primary Schools, and/or what is currently promoted for the Primary levels of instruction as "the Project Approach".

***Suggestion: Another possibility to reduce the amount of time needed for the preparation of materials by supplementary staff would be to try "pairing" teachers with Activity Directors in retirement homes or senior leisure service centers, having "Seniors" or other volunteers do teacher preparation tasks such as cutting, trimming, coloring, stapling, etc.. Many "Seniors" are very eager for purposeful activity.

5. Develop a district wide "At-Risk Pupil Services Plan" which includes at least the following in addition to the already presented recommendations for instructional support:

a. a screening program for all incoming Kindergarten

pupils which includes in addition to current data obtained, specific developmental information for use by Kindergarten teachers in planning instruction. Also use in-classroom Kindergarten teacher observation as a "screener" to assist in identifying children to receive special tutoring services.

b. a more extensive and comprehensive parent involvement and parent education program to assist in breaking the at-risk cycle and addressing some of the causes of at-risk problems.

c. inservice staff development as needed to assist staff in working with behavioral, attention-deficit type and other identified problems occurring within the classroom.

6. As a continuation of Chippewa Falls Area Unified School District's history of staff-involved comprehensive educational planning, consider through discussion and exploration with appropriate teacher and specialist groups, the advantages of the school district making a specific commitment to responsive programs such as the following:

a. a multi-age classroom wherein children can meet clearly defined instructional and developmental objectives without the artificially established time-lines for traditional grade levels;

b. a family-centered program, where the school is one component in a coordinated resource and service agency collaboration to meet families' various needs; and,

c. other programs which have already been suggested or can be identified by staff members (e.g., those within the Oshkosh and Madison school districts have already been mentioned by staff).

7. Continue district leadership at the Early Childhood levels by making instruction and services at the early levels a fiscal priority during budgetary consideration and allocation of resources. Use the knowledge gained through this program evaluation and other sources of information to assign resources to support needed instructional services at the Kindergarten and Primary levels.

VI. BIBLIOGRAPHY

A.---JOURNAL ARTICLES AND BOOKS

Bronson, Martha B. "The Usefulness of an Observational Measure of Young Children's Social and Mastery Behaviors in Early Childhood Classrooms", Early Childhood Research Quarterly, Vol. 9, 1994, pp.19-43.

Campbell, Donald T. "Retrospective and Prospective on Program Impact Assessment", Evaluation Practice, Vol.15, No.3, 1994, pp.291-298.

Chen, Huey-Tsyh. "Current Trends and Future Directions in Program Evaluation", Evaluation Practice, Vol.15, No. 3, 1994, pp. 229-238.

DeRoche, Edward F. An Administrator's Guide for Evaluating Programs and Personnel---An Effective Schools Approach, Boston: Allyn and Bacon, Inc., 1987.

Fournier, Deborah (reviewer). "The Program Evaluation Standards: How to Assess Evaluations of Educational Programs, 2nd Edition", Journal of Educational Measurement, Vol.34, No.4, Winter, 1994, pp.363-367.

Katz, Lilian G. "Perspectives on the Quality of Early Childhood Programs", Phi Delta Kappan, November, 1994, pp.200-205.

Lewis, Timothy and George Sugai. "Functional-Based Assessment Of Social Behavior: Introduction And Overview", Diagnostique, Vol.19, No.2-3, Winter-Spring, 1994, pp.1-4.

McLean, S. Vianne et.al., "Kindergarten curriculum: enrichment and impoverishment", Early Child Development and Care, Vol. 101, 1994, pp.1-12.

Meier, Deborah. "How Our Schools Could Be", Phi Delta Kappan, January, 1995, pp.369-373.

National Study Of School Evaluation. Elementary School Evaluative Criteria---A Guide for School Improvement, Arlington, VA., 1973.

Patton, Mary Martin and Sue Clark Wortham. "Transition Classes, a Growing Concern", Journal of Research in Childhood Education, Vol.8, No. 1, 1993, pp.32-42.

Rampelt, Toby. "Continuous Improvement in the Kindergarten Classroom", Teaching and Change, Vol.2, No.3, Spring, 1995,

pp.195-217.

Shriner, James G. and Richard J. Spicuzza. "Procedural Considerations in the Assessment of Students at Risk for School Failure", Preventing School Failure, Vol.39, No.2, pp.33-38.

Slavin, Robert E. et.al., "Preventing Early School Failure: What Works?", Educational Leadership, December, 1992/January, 1993, pp.10-18.

Stipek, Deborah, et.al. "Effects of Different Instructional Approaches on Young Children's Achievement and Motivation", Child Development, Vol. 66, 1995, pp.209-223.

Townsend, Brenda. "Involving Families of At-Risk and Normally Achieving Children in Social Skill Instruction", Preventing School Failure, Vol.39, No.1, Fall, 1994, pp.31-36.

Wellhousen, Karen. "Assessment of early childhood social development", Dimensions of Early Childhood, Vol.23, No.1, Fall, 1994, pp.32-35.

Ysseldyke, and Martha L. Thurlow. "What Results Should Be Measured to Decide Whether Instruction Is Working for Students with Disabilities", Special Services In The Schools, Vol.9, No.2, 1994, pp.39-49.

B.---ERIC DOCUMENTS (available on microfiche, listed in numerical order by document number)

ED 336494: Koopmans, Matthijs. "A Study of the Longitudinal Effects of All-Day Kindergarten Attendance on Achievement." Newark Board of Education, NJ. Office of Research, Evaluation and Testing, 1991.

ED 340479: Seaman, Don., et al., "Follow-Up Study of the Impact of the Kenan Trust Model for Family Literacy." National Center for Family Literacy, Louisville, KY., 1991.

ED 341112: "2001: A Vision for the Future, 1988-89. A Plan for Improving Instruction and Reducing Dropout and Grade Retention in Charleston County School District. Charleston County School District, SC. Division of Curriculum and Instruction, 1990.

ED 341486: Stoops, Jack, et al. "Developmentally Appropriate Early Childhood Education Handbook on Program Development and Assessment." Chapter 1 Rural Technical Assistance

Center, Portland, OR. Region 6; Northwest Regional Educational Lab., Portland, OR, 1991.

ED 345861: Brock, Sharon L. "Achievement and Enrollment Evaluation of the Early Childhood Development Program, 1990-1991. Kansas City School District, MO., 1991.

ED 346199: Slavin, Robert E. and Renee Yampolsky. "Success for All: Effects on Students with Limited English Proficiency: A Three-Year Evaluation." Center for Research on Effective Schooling for Disadvantaged Students, Baltimore, MD., 1992.

ED 352180: Nye, Barbara A., et al. "Project Challenge Preliminary Report: An Initial Evaluation of the Tennessee Department of Education 'At Risk' Student/Teacher Ratio Reduction Project in Seventeen Counties." Tennessee State University, Nashville. Center of Excellence for Research in Basic Skills, 1992.

ED 355259: "The Des Moines Plan for Student Success. Focus on Program Evaluation." Des Moines Public Schools, Iowa, 1992.

ED 356109: Christner, Catherine. et al., "Chapter 1/Chapter 1 Migrant. Evaluation Findings 1991-92." Austin Independent School District, TX. Department of Management Information, 1992.

ED 358442: Johnson, Jessie. "Adaptation of Curriculum, Instructional Methods, and Materials Component, Instructional Assistant Program, 1991-92." Ohio Disadvantaged Pupil Program Fund. Final Evaluation Report, 1993.

ED 358965: "Illinois Prekindergarten Program for Children at Risk of Academic Failure. FY 91 Summary Report." Illinois State Board of Education, Springfield, Department of Planning, Research and Evaluation.

ED 364361: Gotlieb, Howell, et al. "The Kindergarten Intervention Project: Facilitating the Development of Children's Prosocial Behaviours." (paper presented at the Biennial Meeting of the Society for Research in Child Development, New Orleans, LA, March 25-28, 1993.)

ED 365456: Ejlali, Christine. "LIFE (Learning Is For Everyone) Program Evaluation, October 1, 1989-September 30, 1990." Washington County Board of Education, Jonesboro, TN., 1990.

ED 373456: Ross, Steven M., et al. "Using 'Success for All' To Restructure Elementary Schools: A Tale of Four Cities." (paper presented at the Annual Meeting of the American Educational Research Association, New Orleans, LA, April 4-8, 1994.)

ED 379345: Griffith, Julia E. "Chapter 2 Formula Final Report, 1993-94." Austin Independent School District, TX. Office of Research and Evaluation, 1994.

ED 380216: "Illinois Prekindergarten Program for Children At Risk of Academic Failure. FY 93 Summary Report." Illinois State Board of Education, Springfield, Department of Planning, Research and Evaluation, 1994.

ED 385612: "The Program Evaluation Standards." ERIC Clearinghouse on Assessment and Evaluation, Washington, D.C.. Office of Educational Research nd Improvement (ED), Washington, D.C., October, 1995.

VII. APPENDIX

A. PARENTS' PERMISSION FORM FOR CUMULATIVE FOLDER ACCESS

B. QUESTIONNAIRE WHICH WAS THE SAME FOR ALL INSTRUCTIONAL STAFF

C. SPECIALIZED QUESTIONNAIRES:

1. At-Risk Kindergarten Teachers
2. Kindergarten Teachers
3. Grade 1-5 Teachers
4. Subject Specialists
5. Pupil Services and Special Education Resource Specialists
6. Instructional Assistants
7. Administrative and Central Office Staff
8. Parents

CHIPPEWA FALLS AREA UNIFIED SCHOOL DISTRICT

CHIPPEWA FALLS, WISCONSIN 54729

ADMINISTRATIVE OFFICE – 1130 MILES STREET – TELEPHONE 715/726-2417

September 23, 1996

To: PARENT(S)/GUARDIAN OF: _____

From: Larry D. Annett
Superintendent of Schools

Subject: TRANSITION KINDERGARTEN PROGRAM EVALUATION

During this fall, an evaluation of the Transition Kindergarten program is going to be conducted. We are interested in determining whether children are benefiting or have benefited from this program which has included a lower class size and a lower adult-child ratio.

We are seeking your permission to allow our Program Evaluator, Dr. Priscilla Huffman, Professor, Early Childhood Education, UW-Stout, to examine your child's school records during this process. We can assure you that no child will be identified by name in any report, and no child's individual records will be identified in any report. We are seeking to find out and report how the children are doing overall, "as a group", but in order to do this, the evaluator needs to look at individual children's records.

If this process meets with your approval, would you please sign on the line below and return the bottom portion to your child's teacher?

Thank you very much!

****

Yes, you have my approval to review my child's school records as part of the Transition Kindergarten Program Evaluation.

_____
(Parent/guardian's Signature)

_____
Child's Name (please print)

Please return this form to your child's teacher ----- THANK YOU!!

AN AFFIRMATIVE ACTION EMPLOYER AND EDUCATIONAL INSTITUTION

TRANSITION (At-Risk) KINDERGARTEN PROGRAM EVALUATION

QUESTIONNAIRE: ALL INSTRUCTIONAL AND CLINICAL STAFF

PART A. INFORMATIONAL DATA

1. Please place a checkmark by your current position:

____ Transition (At-Risk) Kindergarten Teacher

____ Kindergarten Teacher

____ 1st Grade Teacher

____ 2nd Grade Teacher

____ 3rd Grade Teacher

____ 4th Grade Teacher

____ 5th Grade Teacher

---- Art Specialist

---- Music Specialist

---- Physical Education Specialist

____ Speech/Language Clinician

____ Exceptional Education Teacher
Please specify:_____

____ Title I Teacher

____ Instructional Assistant

____ Guidance Counselor

____ School Psychologist

____ Other. Please specify: _____

2. Have you worked directly with Transition (At-Risk) Kindergarten children or Transition (At-Risk) Kindergarten "grads" in the past or at present?

____ Yes

____ No

____ Don't know

If you responded "yes", please indicate which years:

____ 1996-97 (current year)

____ 1995-96

____ 1994-95

____ 1993-94

____ 1992-93

3. Have you noticed any differences between Transition Kindergarten "grads" and previous "At-Risk" children who did not have the Transition (At-Risk) Kindergarten program?

____ Yes

____ No

____ Don't know

If you responded "yes", please comment:

4. What would be your prediction of probable success in school for these Transition (At-Risk) Kindergarten "grads", as a whole, as they progress through the remainder of their elementary-, middle-, and high-school grade levels?

1	2	3	4	5
Little Success		Average Success		High Success

5. Is there a need for the Transition (At-Risk) Kindergarten program?

____ Yes

____ No

____ Unsure or no opinion

6. Is there a need for changing or revising the Transition (At-Risk) Kindergarten Program?

____ Yes

____ No

____ Unsure or no opinion

If you responded "yes", what specific changes or revisions would you suggest?

7. What would you identify as some of the Transition (At-Risk) Kindergarten program's strengths?

Suggestions for change or improvement:

8. What would you identify as some of the Transition (At-Risk) Kindergarten program's weaknesses?

Suggestions for change or improvement:

9. Is the Transition Kindergarten program the most effective way to use the $$ available to serve these "At-Risk" children? (The $$ for the Transition Kindergarten program come out of the district's regular budget.)

____ Yes

____ No

____ Unsure or no opinion

If you responded "no", what would you suggest?

10. If the Transition (At-Risk) Kindergarten program were to continue, could you suggest any methods which would improve the current procedure used to identify these "at-risk" children? (Currently, Head Start children, those enrolled in remedial programs and information obtained on parents' self-reported questionnaires are used as "identifiers".)

____ The methods currently used seem to be working fine.

____ I would suggest the following:

11. What else should we be asking in this evaluation of the Transition (At-Risk) Kindergarten program evaluation?

12. Are there any additional comments/suggestions/anecdotes you would like to share?

If you would like to request a follow-up conversation with the program evaluator, please write your name, school and telephone number on an index card provided by the evaluator. She will then contact you at the telephone number you provide. Please also suggest a good time to call.

THANK YOU FOR SHARING YOUR INPUT ON THIS PORTION OF THE PROGRAM EVALUATION. THERE ARE A FEW ADDITIONAL QUESTIONS WHICH RELATE TO YOUR OWN PARTICULAR AREA OF EXPERTISE ON THE OTHER FORM YOU HAVE.

THANK YOU FOR RESPONDING TO THESE QUESTIONS TOO!

SPECIALIZED QUESTIONNAIRE: TRANSITION KINDERGARTEN TEACHERS

Thank you for responding to the first portion of the Transition Kindergarten Program Evaluation Questionnaire. Additionally, there are questions which pertain to your specific role in relationship to the Transition Kindergarten children being served. Your completing these will be appreciated as well.

1. In thinking about these "at risk" children, do you think that it is programmatically sound and/or best for the children to group them together for instruction?

____ Yes

____ No

Please comment:

2. Are you aware of any stigma being associated with children who are currently enrolled or have been enrolled in Transition Kindergarten?

____ Yes

____ No

If you responded "yes", please comment:

3. Do you have any staff development or inservice training needs regarding any aspect of working with these children or their families which would enable you to be even more effective in carrying out your assigned responsibilities?

____ Yes

____ No

Please comment:

4. Is there a need for increased parent education for the families of Transition Kindergarten children?

____ Yes

____ No

If you responded "yes", please comment on what kind of parent education would be helpful:

5. What have been your biggest challenges in implementing the Transition Kindergarten program?

6. This is a question pertaining to the type and extent of developmental progress or academic improvement the Transition (At-Risk) children, as a whole, make as a direct result of their having been through a year of Transition Kindergarten. Using a scale of 1 to 5, please indicate <u>the extent</u> to which the children, as a whole, have improved for each of the areas listed. Please complete as many as you deem appropriate. A blank response for any item will indicate no specific opinion.

1	2	3	4	5
No Improvement		Some Improvement		Significant Improvement

a. Social Interaction Skills

1) ability to work with other children---1 2 3 4 5

2) respect for others----------1 2 3 4 5

3) acceptance by others----------1 2 3 4 5

4) ability to share----------1 2 3 4 5

5) ability to work with adults----------1 2 3 4 5

6) ability to express own thoughts, ideas and feelings----------1 2 3 4 5

b. Academic Performance

1) Art----------1 2 3 4 5

2) Language Arts:

a. Speaking----------1 2 3 4 5

b. Listening----------1 2 3 4 5

c. Writing----------1 2 3 4 5

d. Reading----------1 2 3 4 5

3) Mathematics----------1 2 3 4 5

4) Music----------1 2 3 4 5

5) Physical Education----------1 2 3 4 5

6) Science----------1 2 3 4 5

7) Social Studies----------1 2 3 4 5

(Please continue on next page)

c. Emotional maturity----------1 2 3 4 5

d. Self-control----------1 2 3 4 5

e. Behavior----------1 2 3 4 5

f. Cooperation----------1 2 3 4 5

g. Assertion----------1 2 3 4 5

h. Empathy----------1 2 3 4 5

i. Positive Self-concept----------1 2 3 4 5

j. Creativity----------1 2 3 4 5

k. Physical Development:

1) Fine-motor development----------1 2 3 4 5

2) Gross-motor development----------1 2 3 4 5

3) Physical growth and health----------1 2 3 4 5

l. Motivation to learn----------1 2 3 4 5

m. Assumption of reponsibility for

1) assigned tasks----------1 2 3 4 5

2) one's own learning----------1 2 3 4 5

n. Ability to make choices----------1 2 3 4 5

o. Attendance----------1 2 3 4 5

p. Parental/family involvement with the school----------1 2 3 4 5

q. Other observations or comments you can share---please use the space below:

7. Is there anything else you can share to help us obtain a fair and comprehensive evaluation of the Transition Kindergarten program?

THANK YOU FOR YOUR HELP!

SPECIALIZED QUESTIONNAIRE: KINDERGARTEN TEACHERS

Thank you for responding to the first portion of the Transition Kindergarten Program Evaluation Questionnaire. Additionally, there are questions which pertain to your specific role in relationship to the Transition Kindergarten children being served. Your completing these will be appreciated as well.

1. Have you noticed any differences in your own Kindergarten since the Transition Kindergarten program has been in operation and the "at risk" children are being taught elsewhere?

____ Yes

____ No

Please comment:

2. In thinking about these "at risk" children, do you think that it is programmatically sound and/or best for the children to group them together for instruction?

____ Yes

____ No

Please comment:

3. If the Transition Kindergarten program were to be discontinued and the "at risk" children distributed among all of the district's kindergartens, would you say there is a need for staff development and/or inservice training regarding any aspect of working with these children or their families which would enable you to be more effective in carrying out your assigned responsibilities?

____ Yes

____ No

Please comment:

4. Are you aware of any stigma being associated with children who are currently enrolled or have been enrolled in Transition Kindergarten?

____ Yes

____ No

If you responded "yes", please comment:

5. Is there anything else you can share to help us obtain a fair and comprehensive evaluation of the Transition Kindergarten program?

THANK YOU FOR YOUR HELP!

SPECIALIZED QUESTIONNAIRE: PRIMARY TEACHERS

Thank you for responding to the first portion of the Transition (At-Risk) Kindergarten Program Evaluation Questionnaire. Additionally, there are questions which pertain to your specific role in relationship to the Transition Kindergarten children. Your completing these will be appreciated as well.

Grade Level: _____

1. Please describe the extent to which you have been involved with Transition (At-Risk) Kindergarten "grads":

2. Have the number of referrals you need to make

____ increased?

____ decreased?

____ no difference noted

Comments:

3. Has the Transition Kindergarten program made your job easier as compared with your work with "at-risk" children who have not had the Transition Kindergarten program?

____ Yes

____ No

____ No difference

Comments:

4. Is there a need for increased parent education for the families of Transition (At-Risk) Kindergarten children and "grads"?

____ Yes

____ No

If you responded "yes", please comment on what kind of parent education would be helpful:

5. Is there a need for staff development and/or inservice training regarding any aspect of working with these "at-risk" children or their families which would enable you to be more effective in carrying out your assigned responsibilities?

____ Yes

____ No

If you responded "yes", please comment:

6. Are you aware of any stigma being associated with children who are currently enrolled or have been enrolled in Transition (At-Risk) Kindergarten?

____ Yes

____ No

If you responded "yes", please comment:

7. Is there any other information/data on these children you would like to have provided which would assist you in addressing their educational needs?

____ Yes

____ No

If you responded "yes", please comment:

BEST COPY AVAILABLE

8. For each of the developmental and/or academic areas in the following list, will you please indicate <u>how well</u> the Transition (At-Risk) Kindergarten "grads" are progressing, as a whole, as compared with other children within your same grade level. Please use the following 1 to 5 numerical scale and circle a number for each developmental or academic area to which you can respond.

1	2	3	4	5
Not as well as other children		About the same as other children		Better than other children

a. Social Interaction Skills

1) ability to work with other children---1 2 3 4 5

2) respect for others----------1 2 3 4 5

3) acceptance by others----------1 2 3 4 5

4) ability to share----------1 2 3 4 5

5) ability to work with adults----------1 2 3 4 5

6) ability to express own thoughts, ideas and feelings----------1 2 3 4 5

b. Academic Performance

1) Art----------1 2 3 4 5

2) Language Arts:

a. Speaking----------1 2 3 4 5

b. Listening----------1 2 3 4 5

c. Writing----------1 2 3 4 5

d. Reading----------1 2 3 4 5

3) Mathematics----------1 2 3 4 5

4) Music----------1 2 3 4 5

5) Physical Education----------1 2 3 4 5

6) Science----------1 2 3 4 5

7) Social Studies----------1 2 3 4 5

1	2	3	4	5
Not as well as other children		About the same as other children		Better than other children

c. Emotional maturity----------1 2 3 4 5

d. Self-control----------1 2 3 4 5

e. Behavior----------1 2 3 4 5

f. Cooperation----------1 2 3 4 5

g. Assertion----------1 2 3 4 5

h. Empathy----------1 2 3 4 5

i. Positive Self-concept----------1 2 3 4 5

j. Creativity----------1 2 3 4 5

k. Physical Development:

1) Fine-motor development----------1 2 3 4 5

2) Gross-motor development----------1 2 3 4 5

3) Physical growth and health----------1 2 3 4 5

l. Motivation to learn----------1 2 3 4 5

m. Assumption of reponsibility for

1) assigned tasks----------1 2 3 4 5

2) one's own learning----------1 2 3 4 5

n. Ability to make choices----------1 2 3 4 5

o. Attendance----------1 2 3 4 5

p. Parental/family involvement with the school----------1 2 3 4 5

q. Other observations or comments you can share---please use the space below:

THANK YOU FOR YOUR HELP!

SPECIALIZED QUESTIONNAIRE: SUBJECT SPECIALISTS

Thank you for responding to the first portion of the Transition (At-Risk) Kindergarten Program Evaluation Questionnaire. Additionally, there are questions which pertain to your specific role in relationship to the Transition (At-Risk) Kindergarten children. Your completing these will be appreciated as well.

Your position: _____

1. Please describe the extent to which you have been involved in working with Transition (At-Risk) Kindergarten children both while they are in Kindergarten and in the Primary Grades:

2. Has the Transition (At-Risk) Kindergarten program provided a means for you to do your job more effectively when working with these children?

____ Yes

____ No

Please comment:

3. Are the Transition (At-Risk) Kindergarten children progressing more in your related area of expertise, while they are in the Kindergarten, than they might if enrolled in a regular kindergarten?

____ Yes

____ No

____ About the same

Please comment:

4. For each of the developmental and/or academic areas in the following list, will you please indicate <u>how well</u> the Transition (At-Risk) Kindergarten "grads" are progressing, as a whole, as compared with other children within your specialty area(s). Please use the following 1 to 5 numerical scale and circle a number for each developmental or academic area to which you can respond.

1	2	3	4	5
Not as well as other children		About the same as other children		Better than other children

a. Social Interaction Skills

1) ability to work with other children---1 2 3 4 5

2) respect for others----------1 2 3 4 5

3) acceptance by others----------1 2 3 4 5

4) ability to share----------1 2 3 4 5

5) ability to work with adults----------1 2 3 4 5

6) ability to express own thoughts, ideas and feelings----------1 2 3 4 5

b. Academic Performance

1) Art----------1 2 3 4 5

2) Language Arts:

a. Speaking----------1 2 3 4 5

b. Listening----------1 2 3 4 5

c. Writing----------1 2 3 4 5

d. Reading----------1 2 3 4 5

3) Mathematics----------1 2 3 4 5

4) Music----------1 2 3 4 5

5) Physical Education----------1 2 3 4 5

6) Science----------1 2 3 4 5

7) Social Studies----------1 2 3 4 5

1	2	3	4	5
Not as well as other children		About the same as other children		Better than other children

c. Emotional maturity----------1 2 3 4 5

d. Self-control----------1 2 3 4 5

e. Behavior----------1 2 3 4 5

f. Cooperation----------1 2 3 4 5

g. Assertion----------1 2 3 4 5

h. Empathy----------1 2 3 4 5

i. Positive Self-concept----------1 2 3 4 5

j. Creativity----------1 2 3 4 5

k. Physical Development:

1) Fine-motor development----------1 2 3 4 5

2) Gross-motor development----------1 2 3 4 5

3) Physical growth and health----------1 2 3 4 5

l. Motivation to learn----------1 2 3 4 5

m. Assumption of reponsibility for

1) assigned tasks----------1 2 3 4 5

2) one's own learning----------1 2 3 4 5

n. Ability to make choices----------1 2 3 4 5

o. Attendance----------1 2 3 4 5

p. Parental/family involvement with the school----------1 2 3 4 5

q. Other observations or comments you can share---please use the space below:

5. Please describe any differences having the Transition (At-Risk) Kindergarten has made in terms of your carrying out your specific responsibilities with these children while they are/were in the Kindergarten or while they have been in the Primary Grades:

6. Are there any other comments you would like to make or is there any other documentation you can provide which will help us to obtain a comprehensive evaluation of this program?

THANK YOU FOR YOUR HELP!

SPECIALIZED QUESTIONNAIRE: PUPIL SERVICES AND SPECIAL EDUCATION RESOURCE SPECIALISTS

Thank you for responding to the first portion of the Transition (At-Risk) Kindergarten Program Evaluation Questionnaire. Additionally, there are questions which pertain to your specific role in relationship to the Transition Kindergarten children. Your completing these will be appreciated as well.

Your position: _____

1. Please describe the extent to which you have been involved in working with Transition (At-Risk) Kindergarten children both while they are/were in Kindergarten and in the Primary Grades:

2. Has the Transition (At-Risk) Kindergarten program provided a means for you to do your job more effectively when working with these children?

____ Yes

____ No

Please comment:

3. Please describe any differences having the Transition (At-Risk) Kindergarten has made in terms of your carrying out your specific responsibilities with these children:

BEST COPY AVAILABLE

4. The following are some areas upon which the Transition (At-Risk) Kindergarten might or might not be having an impact. Please respond to and comment on any which fall into your areas of professional responsibilities:

A. Referrals

1) Are referrals being made

____ earlier?

____ later?

____ about the same?

Comments:

2) Are the number of referrals being made

____ more?

____ less?

____ about the same?

Comments:

3) Has the Transition (At-Risk) Kindergarten program reduced the need for referrals in the Primary Grades due to its preventive focus?

____ Yes

____ No

Comments:

BEST COPY AVAILABLE

B. Adequacy of Services

1) How extensively has there been a need for services, in your area of expertise, to Transition (At-Risk) Kindergarten children either while in the Kindergarten or in the Primary Grades?

____ Limited need

____ Average need

____ Extensive need

Please comment:

2) To what degree of adequacy have needed services been provided to Transition (At-Risk) Kindergarten children either while in the Kindergarten or in the Primary Grades?

____ Less than adequate

____ Adequate

____ More than adequate

Please comment:

C. Social and/or Educational Services

Are the parents/families of Transition Kindergarten pupils and Transition Kindergarten "grads" making better use of the various Social Services and Educational Services available to them through the schools and community agencies?

(continued on next page)

BEST COPY AVAILABLE

____ Yes

---- No

Please Comment:

5. What suggestions and/or recommendations might you have for increasing the effectiveness of your area's services to Transition Kindergarten children or Transition Kindergarten "grads" and their families?

If you have any documentation regarding the services you provide Transition (At-Risk) Kindergarten children either while they are in the Kindergarten or in the Primary Grades, which would be helpful in obtaining a more comprehensive evaluation of the Transition Kindergarten program, your letting the evaluator know will be appreciated (Please fill out a card and she will contact you.)

THANK YOU FOR YOUR HELP!

SPECIALIZED QUESTIONNAIRE: <u>SUPPORT STAFF</u>

Thank you for responding to the first portion of the Transition (At-Risk) Kindergarten Program Evaluation Questionnaire. Additionally, there are questions which pertain to your specific role in relationship to the Transition (At-Risk) Kindergarten children. Your completing these will be appreciated as well.

Your position: _____

1. Please describe the extent to which you have been involved in working with Transition Kindergarten children either while they are/were in Kindergarten or in the Primary Grades:

2. If you have been or currently are working with Transition Kindergarten children directly while they are in the Transition Kindergarten program, please indicate <u>approximate</u> percentages as to how your day is/was spent:

_____ working with/teaching children in small groups

_____ working with/teaching children in a large group or total class

_____ supporting instruction in a large group setting

_____ working with/teaching children individually

_____ preparing educational/instructional materials

_____ other----please describe:

_____ not applicable to my situation

Comments:

BEST COPY AVAILABLE

3. Do you have any suggestions as to how your skills and/or time might be used differently in addressing the needs of Transition (At-Risk) Kindergarten children?

4. As you have fulfilled your various responsibilities, are there any other comments you would like to make or is there any other documentation you can provide which will help us to obtain a comprehensive evaluation of this program?

THANK YOU FOR YOUR HELP!

"AT-RISK" KINDERGARTEN PROGRAM EVALUATION---

SPECIALIZED QUESTIONNAIRE: ADMINISTRATIVE AND CENTRAL OFFICE STAFF

Transition (At-Risk) Kindergarten Program Evaluation Questionnaires are being completed by Key Persons throughout the district, including those who are working or have worked directly with the Transition (At-Risk) Kindergarten children in an instructional capacity and those who are familiar with the Transition (At-Risk) Kindergarten program in another capacity. This is the program which began as the district's first all-day, everyday kindergarten program and which has a lower class size and the addition of support staff to meet the needs of identified "at-risk" children. Thus, Administrative and Central Office Staff have an important role in this program evaluation. Your professional perspective regarding the Transition (At-Risk) Kindergarten program is appreciated and will help in our having a comprehensive program evaluation.

Position title:_____

Please complete the following 10 questions:

1. Please describe the extent of your involvement with the Transition (At-Risk) Kindergarten program and its "grads":

2. Have you noticed any differences between Transition Kindergarten "grads" and previous "at risk" children who did not have the Transition Kindergarten program?

____ Yes

____ No

____ Not observed

If you responded "yes", please comment:

3. Is there a need for the Transition (At-Risk) Kindergarten program?

____ Yes

____ No

____ Unsure or no opinion

4. Is there a need for changing or revising the Transition (At-Risk) Kindergarten program?

____ Yes

____ No

____ Unsure or no opinion

If you responded "yes", what specific changes or revisions would you suggest?

5. What would you identify as some of the Transition (At-Risk) Kindergarten program's strengths?

Suggestions for change or improvement:

6. What would you identify as some of the Transition (At-Risk) Kindergarten program's weaknesses?

Suggestions for change or improvement:

7. Is the Transition Kindergarten program the most effective way to use the $$ available to serve these "at risk" children? (The $$ for the Transition Kindergarten program come out of the district's regular budget.)

____ Yes

____ No

____ Unsure or no opinion

If you responded "no", what would you suggest?

8. If the Transition Kindergarten program were to continue, could you suggest any methods which would improve the current procedures used to identify these "at-risk" children? (Currently, Head Start children, those enrolled in remedial programs and information obtained on parents' self-reported questionnaires are used as "identifiers".)

____ The methods currently used seem to be working fine.

___ I would suggest the following:

9. What else should we be asking in this evaluation of the Transition (At-Risk) Kindergarten program evaluation?

10. Are there any additional comments, observations, suggestions and/or anecdotes you would like to share?

If you would like to request a follow-up conversation with the program evaluator, please write your name and telephone number on the index card provided by the evaluator. She will then contact you at the telephone number you provide. Please also indicate a good time to call.

PLEASE RETURN YOUR COMPLETED QUESTIONNAIRE IN A SEALED ENVELOPE TO NANCY BROUGHTON WHERE IT WILL BE PICKED UP BY THE PROGRAM EVALUATOR.

THANK YOU FOR SHARING YOUR INPUT ON THE PROGRAM EVALUATION!

December 3, 1996

TO THE PARENTS OF _____

FROM: Priscilla Huffman
Priscilla Huffman, Evaluator
Transition Kindergarten Program

SUBJECT: YOUR OPINION

Hello! Your opinion is being sought regarding the Transition (all-day, every day) Kindergarten Program which your child has attended. Dr. Annett has asked me to determine how effective it has been. Will you please indicate your opinion by circling your preferred responses to the following statements? (There are no right or wrong answers----we want your honest opinion.) For each statement, please select from the following:

SA = Strongly Agree
A = Agree
U = Undecided
D = Disagree
SD = Strongly Disagree

1. My child has benefitted by attending Chippewa Falls' Transition Kindergarten Program---------- SA A U D SD

2. My child has a positive attitude toward learning---------- SA A U D SD

3. My child has a positive attitude toward himself/herself---------- SA A U D SD

4. My child will be successful throughout his/her school years---------- SA A U D SD

5. Because of this program, I feel better about the school---------- SA A U D SD

6. The Transition Kindergarten teacher made me feel welcome and a part of my child's education---- SA A U D SD

7. I was adequately and appropriately involved in my child's education and academic progress------ SA A U D SD

8. Please answer this question if it is appropriate to your situation:
I have had other children who did not have the Transition Kindergarten program and I have noticed some of the benefits of this child attending the Transition Kindergarten program---------- SA A U D SD

(Please turn this sheet over)

9. Please make any comments you can about your child attending the Transition Kindergarten. Please mention what you liked and/or didn't like about the Transition Kindergarten program. Suggestions for the future are also welcome!

PLEASE PUT THIS FORM IN THE BRIGHT COLORED ENVELOPE PROVIDED, SEAL THE ENVELOPE, AND RETURN IT TO YOUR CHILD'S TEACHER WHO WILL SEE THAT I GET IT.

THANK YOU VERY MUCH FOR YOUR HELP!!